PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10809616

ł		CLAIMS A	S FILED	- PART	j			SMALL	ENTITY		OTHE	DTUAN	
_	 		(Column 1)		(Column 2)		-	TYPE		OF		HER THAN	
TOTAL CLAIMS			1.18				ľ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA		BASIC FE	EE 385.0	O OF	BASIC FÉI		
TOTAL CHARGEABLE CLAIMS			18 m	inus 20=				X\$ 9=		OF	X\$18=	,	
INDEPENDENT CLAIMS			7 minus 3 = *					X43=		OR	You	344	
М	ULTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=		OR			
*	f the differenc	e in column 1 is	less than zero, enter "0" in column 2			column 2		TOTAL		OR		1114	
	(CLAIMS AS A	AMENDE	MENDED - PART II							OTHER		
		(Column 1)		(Colum	n 2)	(Column 3)	_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* ENTATION OF MI	Minus	PENDENT	CLAIM	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								+145= TOTAL		1	TOTAL		
		(Column 1)		(Colum	n 3) .	(Column 3)	A	ADDIT. FEE	<u> </u>	OR	ADDIT. FEE	L	
В		CLAIMS		HIGHE	ST	(Coldinii 3)	lr		ADDI-	ו ר		ADDI	
AMENDMENT E		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME.	Independent	*	Minus	***		= .		X43=			X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT C	LAIM		┟			OR	7.00		
				•			L	+145=.		OR	+290=	•	
							· A	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		(Column 1)		(Column		(Column 3)	,			•			
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		· =		X\$ 9=	1	OR	X\$18=		
	Independent		Minus	***		=	H	X43=			X86=		
`_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700-		
							١.	+145=		OR	+290=	. 1	
* It	the entry is solve	n 1 ic loce + +-				_	L.	i					
II	the "Highest Nurr	nn 1 is less than the ober Previously Pain ober Previously Pain	d For IN THIS	SPACE is to	ee than	20 enter *20 *	L AD	TOTAL DIT. FEE			TOTAL DDIT. FEE		